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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

15 JUN - I PM 2: 05

						1 4	Office Use Only
1. NAME COMMI	OF TTEE (in full)	TYPE OR PRINT ₩		ample:If typing er the lines.	ı, type	12FE4M5	
Dr. Monica Wehby for U.S. Senate							
ADDRESS (number and street) PO Box 3375							
tha	eck if different n previously orted. (ACC)	Portland			<u> </u>	OR	97208
	DENTIFICATION N	JMBER ▼	CITY▲			STATE ▲	ZIP CODE ▲
C0;05	50996		3. IS THIS REPORT	X (N)	OR	AMENE (A)	STATE V DISTRICT
	OF REPORT (Cho arterly Reports: April 15 Quarterly F July 15 Quarterly R	Report (Q1)	D) 12-Day PRE	Primary (12F	P)	General Special (
	October 15 Quarter January 31 Year-Er	15 (0/5)	Election on			L	State of
Х	Termination Report	1,	s) 30-Day POS	General (30		: Runoff (3	Special (30S)
			Election on	M • M /	oro)		in the State of
5. Covering Period 04 01 2015 through 05 26 2015							
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.							
Type or Print Name of Treasurer Bryan Burch							
Signature of Treasurer Date 05 26 2015							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.							
1 4	ffice Jse Only						FEC FORM 3 (Revised 02/2003)

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